POSITION	INITIALS	ID NO.	DATE
	DM	*7091*	*8/3*
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		*48*	*4/6/00*
FORMALITY REVIEW		*(signature)*	*2-30*
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
−	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim		Date								
Final	Original	8/14/2002	4/7/03	2/20/04						
	(1)	✓	✓	A						
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If more than 150 claims or 10 actions
staple additional sheet here

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